PAGE 1 / 31

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		n Authorize		_			Office Use Only	
NAME OF COMMITTEE (in	TYPE OR PI	RINT ▼		mple: If typin r the lines.	g, type	12FE4M5		
Friends of Carl	Domino							ı
ADDRESS (number and	d street)	in Trail						
Check if diff than previou reported. (A	sly Jupiter					FL L	33458-7737	
2. FEC IDENTIFIC	ATION NUMBER	C	ITY A			STATE A	ZIP CODE A STATE ▼ DIS	TRICT
C C0054728	1	3. IS ⁻ REI	THIS PORT	× NEW (N)	OR	AMENI (A)		18
4. TYPE OF REF	PORT (Choose One)	(b) 10 F	Day DDE	Floation Done	ut fau thai			
(a) Quarterly Re	eports:	(b) 12-E	Day PRE-	Election Repo		1		
April 15	Quarterly Report (Q1)		Ш	Primary (12P)		General (12G) Runoff (1	12R)
July 15	Quarterly Report (Q2)		Ш	Convention (12C)	Special (1	12S)	
	15 Quarterly Report (Q3	B) Elec	ction on	M M /	D D /	YYYY	in the State of	
× January	31 Year-End Report (YE	(c) 30-E	Day POS 1	-Election Rep	oort for the:			
				General (30G)	Runoff (30	OR) Special ((30S)
Termina	tion Report (TER)	Elec	ction on	M M /	D D /	Y Y Y Y	in the State of	
5. Covering Period	10 / D 01	/ Y Y 2015	YYY	through	M M 12	/ D D /	2015	
I certify that I have e.	xamined this Report and	d to the best	of my kno	owledge and I	belief it is tru	ie, correct and	d complete.	
Type or Print Name of	of Treasurer Gregory V	Vilder						
Signature of Treasure	r Gregory Wilder			Electronically 1	Filed] D	ate 01	30 / 2016	
NOTE: Submission of	false, erroneous, or incor	mplete informat	ion may s	ubject the per	son signing t	his Report to t	the penalties of 2 U.S.C. §	}437g.
Office Use Only							FEC FORM 3 (Revised 02/2003)	

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 31

Write or Type Committee Name Friends of Carl Domino

12 31 2015 01 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 600.00 745.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 145.00 (from Line 20(d)) (c) Net Contributions (other than loans) 600.00 600.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 15128.70 40519.60 (from Line 17) (b) Total Offsets to Operating 0.00 6328.97 Expenditures (from Line 14)..... (c) Net Operating Expenditures 15128.70 34190.63 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 280172.30 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1492999.99 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 12/2003) of Receipts PAGE 3/31

Write or Type Committee Name

Friends of Carl Domino

Report Covering the Period: From: 10 01 2015 To: 12 31 2015

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. (CONTRIBUTIONS (other than loans) FROM:		
((a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	500.00	500.00
	(ii) Unitemized(iii) TOTAL of contributions	100.00	245.00
	from individuals	600.00	745.00
	b) Political Party Committees	0.00	0.00
·	(such as PACs)	0.00	0.00
	d) The Candidatee) TOTAL CONTRIBUTIONS (other than loans)	0.00	0.00
	(add Lines 11(a)(iii), (b), (c), and (d))	600.00	745.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
	OANS: a) Made or Guaranteed by the		
,	Candidate	50000.00	307999.99
	b) All Other Loans	0.00	0.00
	(add Lines 13(a) and (b))	50000.00	307999.99
	OFFSETS TO OPERATING EXPENDITURES		
	Refunds, Rebates, etc.)	0.00	6328.97
	DIVIDEN RECEIPTS Dividends, Interest, etc.)	0.00	0.00
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	50600.00	315073.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 31

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	15128.70	40519.60
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:	_	
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans		0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	145.00
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees		
	(such as PACs)		0.00
	(d) TOTAL CONTRIBUTION REFUND (add Lines 20(a), (b), and (c))	0.00	145.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	15128.70	40664.60
	III. CAS	SH SUMMARY	
23.	CASH ON HAND AT BEGINNING OF	REPORTING PERIOD	244701.00
:4	TOTAL RECEIPTS THIS PERIOD (from	n Line 16, page 3)	50600.00
5.	SUBTOTAL (add Line 23 and Line 24))	295301.00
6.	TOTAL DISBURSEMENTS THIS PERIO	DD (from Line 22)	15128.70
	CASH ON HAND AT CLOSE OF REPO		280172.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE	:	5	OF	31	
(cl	(check only one)							
	X 11a	11b		11c		11	d	_
	12	13a		13b		14	. [15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Carl Domino Full Name (Last, First, Middle Initial) Frederick Tramutola Date of Receipt Mailing Address 119 Terrapin Trail 19 2015 City State Zip Code Transaction ID: AEFAB50AA6319406781A FL 33458-7723 Jupiter FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Retired Retired Receipt For: 2016 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt B. Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing С Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 500.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER: PAGE 6 OF 31				
Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a				
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.					

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Friends of Carl Domino Full Name (Last, First, Middle Initial) Carl J Domino Date of Receipt Mailing Address 136 Terrapin Trail 2015 14 City State Zip Code Transaction ID: AF5247597B7BA4511A7C FL 33458-7737 **Jupiter** FEC ID number of contributing Amount of Each Receipt this Period H4FL18068 federal political committee. 50000.00 Name of Employer Occupation Candidate Loan Carl Domino, Inc. Investment Management Receipt For: 2016 Election Cycle-to-Date | Primary General 307999.99 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 50000.00 SUBTOTAL of Receipts This Page (optional)..... 50000.00 TOTAL This Period (last page this line number only).....

ITEMIZED DISBURSEMENTS

7 31 FOR LINE NUMBER: **PAGE** SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the **X** 17 19b 18 19a Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Friends of Carl Domino Full Name (Last, First, Middle Initial) Date of Disbursement BB&T 2015 Mailing Address 955 Saxon Boulevard 10 01 City State Zip Code Amount of Each Disbursement this Period FΙ Orange City 32763-8314 Purpose of Disbursement 15.00 Bank Fee 001 Transaction ID: B7EB20FA3C055410CA20 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) Dickinson and McDonald, P.A. Date of Disbursement Mailing Address 201 S Florida Avenue 10 80 2015 City State Zip Code Amount of Each Disbursement this Period FL 32720-5405 Deland 1500.00 Purpose of Disbursement Accounting 001 Transaction ID: BDC5D3BB0E6344DB19F4 Candidate Name Category/ Type Disbursement For: Office Sought: 2016 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. Dickinson and McDonald, P.A. Date of Disbursement Mailing Address 201 S Florida Avenue 02 2015 City State Zip Code Amount of Each Disbursement this Period Deland FL 32720-5405 Purpose of Disbursement 1500.00 Accounting 001 Transaction ID : B60E36584A71E42C6B31 Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: District: 3015.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

SC	CHEDULE B (FEC Form 3)	Use separate sch	nedule(s)	FOR LINE NUMBER: PAGE 8 OF 31 (check only one)
TI	EMIZED DISBURSEMENTS	for each category Detailed Summar	of the	X 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
/	Friends of Carl Domino			
	Full Name (Last, First, Middle Initial) BB&T			Date of Disbursement
٦.				M = M / D = D / Y = Y = Y
	Mailing Address 955 Saxon Boulevard			11 02 2015
	City State Orange City FL	Zip Code 32763-8314		Amount of Each Disbursement this Period
	Purpose of Disbursement	32703-0314		15.00
	Bank Fee Candidate Name		001	Transaction ID : B3A7EE4FF39D34E71AF8
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement For Senate Primary	: 2016 General		
	President Other (s			
	State: District:			
3.	Full Name (Last, First, Middle Initial) Dickinson and McDonald, P.A			Date of Disbursement
	Mailing Address 201 S Florida Avenue			12 01 / Y Y Y Y Y
		7in Codo		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	City State Deland FL	Zip Code 32720-5405		Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting		001	1500.00
	Candidate Name		Category/	Transaction ID : B2273D2BF83794FBB8D4
	Office Sought: House Disbursement For	. 2040	Type	
	Office Sought: House Disbursement For Senate Disbursement For Primary	General		
	President Other (s	specify)		
	State: District: Full Name (Last, First, Middle Initial)			
Э.	BB&T			Date of Disbursement
	Mailing Address 955 Saxon Boulevard			M M / D D / Y Y Y Y 12 01 2015
	City State Zi	p Code		Amount of Each Disbursement this Period
		2763-8314		
	Purpose of Disbursement Bank Fee		001	15.00
	Candidate Name		Category/ Type	Transaction ID : BC831E9F59983471D985
	Office Sought: House Disbursement For			
	Senate Primary President Other (s	General (specify)		
	State: District:	· • • • • • • • • • • • • • • • • • • •		
				1530.00
S	UBTOTAL of Disbursements This Page (optional)			1330.00

TOTAL This Period (last page this line number only).....

S

		B (FEC Form SBURSEMENT	-	Use separate sch for each category Detailed Summar	nedule(s) / of the	FOR LINE NUMBER: PAGE 9 OF 31 (check only one) X 17
						person for the purpose of soliciting contributions e to solicit contributions from such committee.
	Friends of (AITTEE (In Full) Carl Domino				
Full Name (Last, First, Middle Initial) A. Advancing Strategies, LLC Mailing Address P.O. Box 96				Date of Disbursement		
	Mailing Address City	P.O. Box 96	State	Zip Code		Amount of Each Disbursement this Period
	Midlothian Purpose of Disbu Strategic Plannir	ursement ng	VA	23113-0096	001	7500.00
	Candidate Name				Category/ Type	Transaction ID: B7E870E42882E4F8D886
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General		
В.	•	District: First, Middle Initial) And Associates	<u> </u>			Date of Disbursement
	Mailing Address	P.O. Box 368				12 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Falls Church Purpose of Disbu	ırsement	State VA	Zip Code 22040-0368		Amount of Each Disbursement this Period
	Fundraising orga Candidate Name	anizer			003 Category/ Type	Transaction ID : B8C49B0C1856749AB95D
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	7,7-2	
	State:	District: First, Middle Initial)		,		
C.	•					Date of Disbursement
	Mailing Address					
	City		State Zi _l	p Code		Amount of Each Disbursement this Period
	Purpose of Disbu Candidate Name	ırsement			Category/ Type	
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General	ιγρ ο	
_	State:	District:		,		
1.						10565.70

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

15110.70

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 10

13a 13b

OF

	Detailed Summary Fage 13b
NAME OF COMMITTEE (In Full)	Transaction ID : CE31803D0DF4A4475982
Friends of Carl Domino	
LOAN SOURCE Full Name (Last, First, Middle Initial)	[PERSONAL FUNDS] Election: 2014
Carl J Domino	Primary
Mailing Address	General Other (specific)
136 Terrapin Trail	Other (specify) ▼
City State	ZIP Code
Jupiter FL	33458-7737
Original Amount of Loan Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
50000.00	0.00 50000.00
9 9	
TERMS Date Incurred Date	ate Due Interest Rate Secured:
M 10 / D 18 / Y 2013 Y M M / D D	/ None 0.00 % (apr)
List All Endorsers or Customators (if any) to Loop Source	Yes No
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer
1. I dii Name (Last, First, Middle Initial)	Traine of Employs.
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed
5,	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	A
City State ZIP Code	Amount Guaranteed
5.1.y 514.15 <u>-</u> 554.5	Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed
Sity State 2.11 South	Outstanding:
SUBTOTALS This Period This Page (optional)	50000.00
TOTALS This Period (last page in this line only)	
TO THE POINT GIVE (MOE PAGE III THE OTHY)	
Carry outstanding balance only to LINE 3, Schedule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 11

13a 13b

OF

			130		
NAME OF COMMITTEE (In Full) Friends of Carl Domino		Transac	tion ID : C06B3A1CE6349472496F		
LOAN SOURCE Full Name (Last, First, Middle Carl J Domino Mailing Address	le Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General Other (specify) ▼		
136 Terrapin Trail					
City S Jupiter	State ZIP Coo FL 33458-7				
	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period		
100000.00	, ,	0.00	100000.00		
Date Incurred M 10 / D 10 / Y 2014 M	Date Due	None Interest Rate			
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	Loan Source	Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Guaranteed Outstanding:	9 9		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (optional)		>	100000.00		
TOTALS This Period (last page in this line only).					
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 12

13a 13b

OF

						130
	ME OF COMMITTEE (In Full) riends of Carl Domino				Transa	action ID : C25D42374E98D4564AFB
	LOAN SOURCE Full Name (Last, First, Midd Carl J Domino Mailing Address	dle Initial)		[PERSONA	L FUNDS]	Election: 2014 Primary General Other (creatify)
	136 Terrapin Trail					Other (specify)
	,	State	ZIP Coc			
	Jupiter	FL	33458-7			
	Original Amount of Loan 50000.00	Cumulative Pay	ment To	Date 0.00		lance Outstanding at Close of This Period
	TERMS Date Incurred	Da	ate Due		Interest Rat	te Secured:
	M12 ^M / D31 ^D / Y 2013 Y		/ Y	Ňone Y	0.0	
	List All Endorsers or Guarantors (if any) to	Loan Source				
	1. Full Name (Last, First, Middle Initial)			Name of Em	ployer	
	Mailing Address			Occupation		
				Amount		
	City State	ZIP Code		Guaranteed Outstanding:	L	yy
	2. Full Name (Last, First, Middle Initial)			Name of Em	ployer	
	Mailing Address			Occupation		
	City State	ZIP Code		Amount Guaranteed		
	3. Full Name (Last, First, Middle Initial)			Outstanding: Name of Em		, , , , -
	Mailing Address			Occupation		
	City State	ZIP Code		Amount Guaranteed Outstanding:		7
	4. Full Name (Last, First, Middle Initial)			Name of Em		
	Mailing Address			Occupation		
				Amount		
	City State	ZIP Code		Guaranteed Outstanding:		7 7 7 7
SI	JBTOTALS This Period This Page (optional)				, [50000.00
T	OTALS This Period (last page in this line only)				- [7 7 7 7 7
<u> </u>	arry outstanding balance only to LINE 3, Sche	adula D. for this	line If -	o Sabadula I	D corrector	ward to appropriate line of Summer-
$oldsymbol{ol{ol{ol}}}}}}}}}}}}}}}}}$	arry outstanding balance offig to Line 3, Sche	date D, IOI tills	mie. ii i	o ochedule i	o, carry ior	wara to appropriate line or sumillary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 13 OF

X	13a
	13b

			Tran	saction ID : CD682B4C5F30B4C6F957
	ME OF COMMITTEE (In Full) iends of Carl Domino		rran	Saction ID: CD002D4C0F30D4C0F307
	LOAN SOURCE Full Name (Last, First, Middle Initial)		[PERSONAL FUNDS	I Election: 2014
	Carl J Domino		-	Primary General
	Mailing Address 136 Terrapin Trail			Other (specify) ▼
	City State	ZIP Code		
Ŀ	Jupiter FL	33458-773	37 	
	Original Amount of Loan Cumulative Pay	ment To Da	ate E	Balance Outstanding at Close of This Period
	50000.00	9	0.00	50000.00
	TERMS Date Incurred	ate Due	Interest F	Rate Secured:
	M ₀₉ M / D ₁₇ D / Y 2013 Y M M / D D	/ Y Ň	one Y	0.00 % (apr) Yes No
	List All Endorsers or Guarantors (if any) to Loan Source			ies ino
	1. Full Name (Last, First, Middle Initial)	N	lame of Employer	
	Mailing Address	С	Occupation	
			mount	
	City State ZIP Code		Guaranteed Outstanding:	9 9
	2. Full Name (Last, First, Middle Initial)	N	lame of Employer	
	Mailing Address	С	Occupation	
			mount	
	City State ZIP Code		Guaranteed Outstanding:	
	3. Full Name (Last, First, Middle Initial)	N	lame of Employer	
	Mailing Address	С	Occupation	
-	City State ZIP Code	G	mount Guaranteed	
-	4. Full Name (Last, First, Middle Initial)		Outstanding: lame of Employer	, , -
-	Mailing Address	C	Occupation	
	City State ZIP Code	G	amount Guaranteed Outstanding:	9 9
SU	BTOTALS This Period This Page (optional)		>	50000.00
то	TALS This Period (last page in this line only)		>	
C	arry outstanding balance only to LINE 3, Schedule D, for this	s line If no	Schedule D. carry f	orward to appropriate line of Summary
Uč	ary catataining balance only to Link 3, Schedule D, for this	, 11110	Concudie D, Carry I	ormana to appropriate line of Juli lilidiy.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

14 OF

13a

31

13b Transaction ID: CA1DAAAA8E16249A9B05 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino ★ General Mailing Address Other (specify) 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D12 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 15

13a 13b

OF

		Detailed Garrinary 1 a	13b
NAME OF COMMITTEE (In Full)		Transa	ction ID : C795661985B814E8E8F1
Friends of Carl Domino			
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	[PERSONAL FUNDS]	Election: 2014
Carl J Domino			Primary
Mailing Address			☐ General Other (specify) ▼
136 Terrapin Trail			
City	State ZIP Co	de	
Jupiter	FL 33458-	7737	
Original Amount of Loan	Cumulative Payment To	Date Bal	ance Outstanding at Close of This Period
25000.00		0.00	25000.00
2000000		0.00	2000.00
TERMS Date Incurred	Date Due	Interest Rat	re Secured:
M ₀₇ M / D ₂₂ D / Y Ž013 Y	M M / D D / Y	None 0.0	
07 22 2013		None	% (apr) Yes No
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed	
		Outstanding:	ý
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	
only only	0000	Outstanding:	9 9 9
SUBTOTALS This Period This Page (optional).		·····	25000.00
TOTALS This Period (last page in this line onl	у)		
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FOR LINE NUMBER: (check only one)

PAGE 16

13a 13b

OF

	Detailed Summary Page 13b		
NAME OF COMMITTEE (In Full) Friends of Carl Domino	Transaction ID : CF4DDD97D70D74753BDE		
LOAN SOURCE Full Name (Last, First, Middle Initial) Carl J Domino	[PERSONAL FUNDS] Election: 2014 Primary		
Mailing Address 136 Terrapin Trail	General Other (specify) ▼		
	Code 58-7737		
Original Amount of Loan Cumulative Payment	To Date Balance Outstanding at Close of This Period 0.00 60000.00		
Date Incurred Date D M 08 / D23 / Y 2014 Y M M / D D /	ue Interest Rate Secured: y None 0.00 % (apr) Yes No		
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City State ZIP Code	Amount Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)			
Carry outstanding balance only to LINE 3, Schedule D, for this line.	If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE FOR LINE NUMBER: (check only one)

17

$\overline{\mathbf{v}}$	122
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	13b

31

Transaction ID: C2B780CE1DB5E400E92E NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D26 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE FOR LINE NUMBER: (check only one)

18 OF

	_	
×		13a
		13b

31

Transaction ID: C016BFEEDACE447599B3 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 03^M ^D28^D ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

19 OF

×	13a
	13b

31

Transaction ID: C697E740F1A824528BE9 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D 17 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

20 OF

×	13a
	13b

31

Transaction ID: C3B05664908594755842 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 18^D ^M 03^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE FOR LINE NUMBER: (check only one)

21 OF

	1
×	13a
	13b

31

Transaction ID: C355DC418AFC04E3A88A NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M 03 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE FOR LINE NUMBER: (check only one)

22

×	13a
	13b

31

Transaction ID: C20BA55040CB142D9B0D NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: м _{= М} 20 2013 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 23

13a 13b

OF

		Detailed Summary Pa	lge 13b
NAME OF COMMITTEE (In Full) Friends of Carl Domino		Transa	ction ID : CC9B25446B56F460D8A6
LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary
Mailing Address 136 Terrapin Trail			General Other (specify) ▼
City Jupiter	State ZIP Cod FL 33458-7		
Original Amount of Loan 50000.00	Cumulative Payment To I	Date Bal	ance Outstanding at Close of This Period 50000.00
Date Incurred MO3 / DO7 / Y ZO14 Y		Interest Rat None Y 0.0	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 1 9 1 9
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This Page (optional)			
Carry outstanding balance only to LINE 3, Sch	edule D, for this line. If n	o Schedule D, carry for	ward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

24 OF

X	13a
	13b

31

Transaction ID: CE62407D3943540CCBB6 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 99000.00 0.00 99000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M 06^M 2015 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 99000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

25 OF

13a 13b

31

Transaction ID: C2A43E70F8CFD4EB58C6 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 9000.00 0.00 9000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 04 ^D10^D 2015 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 9000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE FOR LINE NUMBER: (check only one)

26 OF

×	13a
	13b

31

Transaction ID: C979843984C654CFC9B7 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 99999.99 0.00 99999.99 **TERMS** Date Incurred Date Due Interest Rate Secured: 01 ^M 06^M 2015 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 99999.99 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 27

ER: X 13a 13b

		Detailed Summary Pag	ge 13b
AME OF COMMITTEE (In Full)		Transac	tion ID : C683D642F0F684A8BB08
Friends of Carl Domino			
LOAN SOURCE Full Name (Last, First, Midd	fle Initial)	[PERSONAL FUNDS]	Election: 2016
Carl J Domino			Primary General
Mailing Address 136 Terrapin Trail			Other (specify)
City	State ZIP Co	de	
Jupiter	FL 33458-	7737	
Original Amount of Loan	Cumulative Payment To	Date Bala	nce Outstanding at Close of This Period
50000.00	2	0.00	50000.00
TERMS Date Incurred	Date Due	Interest Rate	e Secured:
M 09 M / D 18 D / Y Ž015 Y	M / D D / Y	Ňone Y 0.00	% (apr) Yes No
List All Endorsers or Guarantors (if any) to	Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City State	ZIP Code	Outstanding:	9
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	7
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This Period Trils Page (optional)			50000.00
TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE 3, Sche	edule D, for this line. If	no Schedule D, carry forw	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

28 OF

X 13a

31

Transaction ID: C2B261BF2BB254FB082C NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 10^M 20 ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 29

13a 13b

OF

	Detailed Suffirmary	Page 13b
NAME OF COMMITTEE (In Full)	Trai	nsaction ID : C3CDF4669F62F461F989
Friends of Carl Domino		
LOAN SOURCE Full Name (Last, First, Middle Initial Carl J Domino	[PERSONAL FUND	Election: 2014 Primary General
Mailing Address 136 Terrapin Trail		Other (specify) ▼
City State	ZIP Code	·
Jupiter FL 33458-7737		
Original Amount of Loan Cumulation 50000.00	tive Payment To Date 0.00	Balance Outstanding at Close of This Period 50000.00
Date Incurred M 08 / D 20 / Y 2013 Y M M /	Date Due Interest	Rate Secured: 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan S	ource	Tes INC
1. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	. , , , , , , , , , , , , , , , , , , ,
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9 9 9
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9 9 9
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
City State ZIP Co	Amount Guaranteed Outstanding:	9 1 9 1 9
SUBTOTALS This Period This Page (optional)		
TOTALS This Period (last page in this line only)		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

30 OF

13a

31

13b Transaction ID: CF5247597B7BA4511A7C NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) \blacktriangledown 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^м 12^м ^D14 2015 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

31

13a 13b

31

OF

Transaction ID: C3C643D81F26E4B32827 NAME OF COMMITTEE (In Full) Friends of Carl Domino LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Carl J Domino General Mailing Address Other (specify) 136 Terrapin Trail State ZIP Code City FL 33458-7737 Jupiter Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M 10^M ž014 0.00 Ňoně % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 1492999.99 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.